

## STATE HEALTH COUNCIL

November 13, 2012

A meeting of the State Health Council was called to order by Chairman Gordon Myerchin at 9:30 a.m. on Tuesday, November 13, 2012 in AV Room 212 of the Judicial Wing, State Capitol, Bismarck, ND.

### Members present:

Gordon Myerchin, Grand Forks, Chairman  
Marlene Kouba, Regent, Secretary  
Greg Allen, Jamestown  
Hjalmer Carlson, Minot, *by teleconference*  
Jerry Jurena, Bismarck  
Wade Peterson, Mandan  
Dennis Wolf, MD, Dickinson

### Members absent:

Carmen Toman, Bismarck, Vice Chairman  
Howard Anderson, Turtle Lake  
Mike Jones, Bismarck  
Lee Larson, Leeds

### Staff members present:

Terry L. Dwelle, MD, State Health Officer  
Arvy Smith, Deputy State Health Officer  
John Baird, MD, Special Populations Section  
Gary Garland, Office of Community Assistance  
Dave Glatt, Environmental Health Section  
Kirby Kruger, Medical Services Section  
Londa Rodahl, Recording Secretary  
Tim Wiedrich, Emergency Preparedness & Response Section

### Others present:

See ATTACHMENT A

## Minutes

MRS. KOUBA MOVED APPROVAL OF THE AUGUST 14 AND OCTOBER 16, 2012 MINUTES AS MAILED. SECONDED BY MR. ALLEN AND CARRIED.

## Section Updates

Dr. John Baird presented the update on the Special Populations Section, Kirby Kruger on the Medical Services Section, and Tim Wiedrich on the Emergency Preparedness & Response Section.

## Nursing Shortage

Shelly Peterson, executive director of the North Dakota Long Term Care Association, presented ATTACHMENT B.

### **Septic Tank Pumpers Law & Enforcement**

Dave Glatt updated the Council on where the Department stands on the major environmental issue of companies mishandling large amounts of septage/septic waste in the state's oil patch regions. The Department has issued notices of violation with two companies and is currently negotiating fines with them. The Department is also looking at what conditions can be put on their licenses if they are allowed to continue operating.

The Department plans to update the rules pertaining to land-applying septage. The current law was created in the 1950s and worked well in the agricultural society of that time but the state has now become an industrial society in the oil patch region and more controls are needed for state oversight and appropriate treatment of septage.

### **Loan Repayment Applications**

Gary Garland questioned what the Council wished to do with dental loan repayment applications based on the application guidelines developed at the August meeting. The guidelines established application submittal deadlines, review process deadlines, and payment timelines.

MR. PETERSON MOVED THAT WE HOLD THE CURRENT DENTAL LOAN REPAYMENT APPLICATIONS UNTIL CLOSER TO THE SUBMITTAL DEADLINE (March 15) IN ORDER FOR ALL APPLICANTS TO BE CONSIDERED AT THE SAME TIME. SECONDED BY DR. WOLF AND CARRIED.

Mr. Garland presented the loan repayment applications for three physicians and one physician assistant, all of whom are practicing in Dickinson, ND. All of these applications qualify for using federal and community funds rather than using state dollars.

MR. ALLEN MOVED THE APPROVAL OF THE PHYSICIAN LOAN REPAYMENT APPLICATIONS FOR SHIRLEY EUGENE, DO; WANDA J. ABREAU, MD; KRISTEN PRESCOTT, MD; AND THE PHYSICIAN ASSISTANT LOAN REPAYMENT APPLICATION FOR JAMES ANTES. SECONDED BY MRS. KOUBA.

The Chair requested a roll call vote and the MOTION CARRIED. Allen, Carlson, Kouba, Myerchin and Peterson voted 'aye'. Wolf abstained. There were no 'nay' votes. Anderson, Jones, Jurena, Larson and Toman—absent.

### **Tobacco Tax**

Dr. Wolf noted that recently the Morbidity & Mortality Weekly Report (MMWR) reported what each state pays for tobacco tax. All of the tobacco-producing states have higher taxes than North Dakota, which is 44 cents. Minnesota's is around \$1.75, South Dakota \$1.70, Montana \$1.80. The tobacco-producing states have taxes around \$1.00 and \$1.25. Discussion followed on whether there was anything the Health Council could do to promote a higher tobacco tax.

MR. PETERSON MOVED THAT STATE HEALTH COUNCIL MEMBERS TALK TO THEIR LEGISLATORS TO ENCOURAGE AN INCREASE OF THE STATE TOBACCO TAX. SECONDED BY DR. WOLF AND CARRIED.

### **Nursing Home Beds**

The Department received a request from a nursing facility in Steele, ND, questioning the decision by the Health Department and the Department of Human Services which denied the facility approval for more basic care beds. This decision was based on two criteria: 90% occupancy within a 50-mile radius and 15 per 1000 of population of beds available. The facility didn't meet either of these criteria.

The Health Council's Subcommittee on Long Term Care Beds chose not to change the criteria but asked for an Attorney General's opinion of the words "and" and "or" in the law. The Department is drafting the letter to request the opinion and will inform the subcommittee when the opinion is received.

### **Audit Report**

Arvy Smith reported an operational audit of the Department is done every two years. There were no formal audit recommendations contained in the audit report. Three informal recommendations were made and if the Department doesn't implement them, they may come back next time as formal recommendations.

The audit went before the Legislative Audit & Fiscal Review Committee and there were no questions or comments by them on the audit. This committee only looks at the formal recommendations so the informal ones aren't even discussed.

### **Budget and Legislation Update**

Ms. Smith reviewed the summary of the Department's budget request as well as the optional package for the budget.

The meeting adjourned at 1:15 p.m.

Submitted,



Marlene Kouba, Secretary



## STATE HEALTH COUNCIL MEETING ATTENDANCE SHEET

North Dakota Department of Health  
SFN 8104

Date: NOVEMBER 13, 2012

Please PRINT

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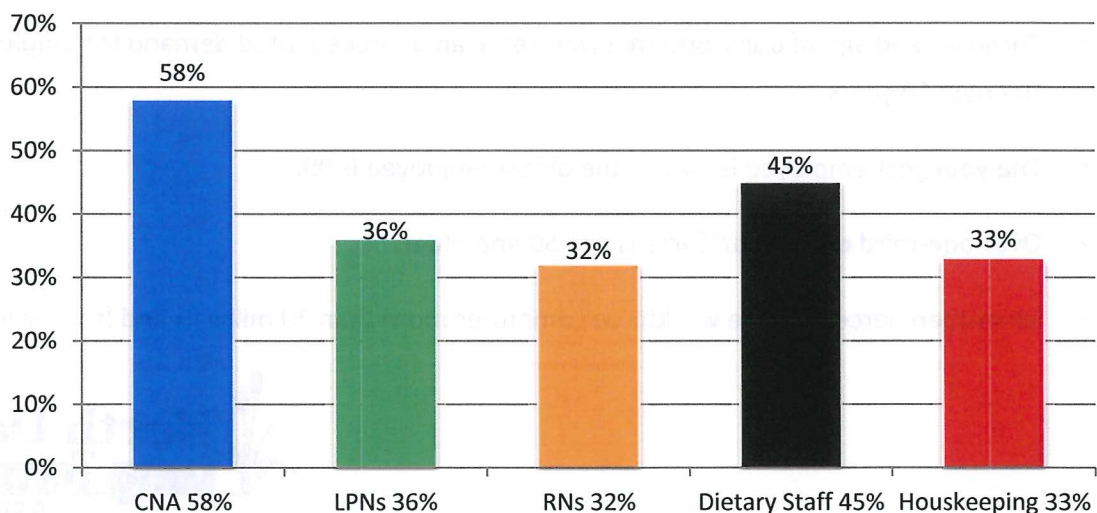
# Nursing Facility Workforce

ATTACHMENT B

## Nursing Facility Workforce

- Top issue facing nursing facilities is staffing.
- Number of individuals employed in 68 nursing facilities was 9,267. Based upon this ratio, total people employed by 83 nursing facilities are estimated to be 11,311.
- July 1, 2012, sixty-three nursing facilities reported 751 vacant positions. The estimate for all 83 nursing facility vacancies is 989.
- North Dakota will need 1,880 additional nurses by 2018.
- Nine of sixty-six reporting nursing facilities stopped admissions in 2012 because of a lack of staff.
- Sixty-six percent of nursing facilities, 2 out of 3 facilities, used contract agency staff in 2012 to staff their facilities.
- The use of contract nursing over the previous twelve months is up over 100%.
- The 2012 average salary increase provided was 2.9%, however one-third of nursing facilities also provided an extra enhancement to retain their employees. Enhancements were as high as \$5 per hour to 20% increases.

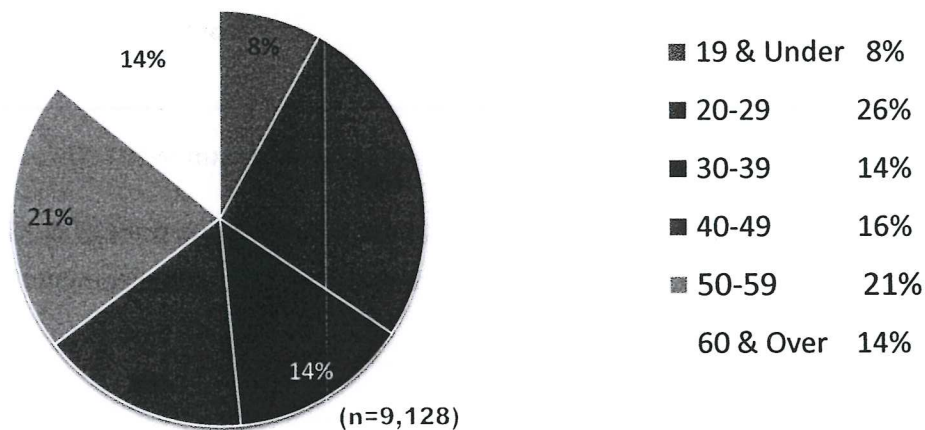
## 2012 Staff Turnover



# Nursing Facility Workforce (continued)

History of Nursing Facility Turnover 1995 to 2012						
Position	1995	2000	2003	2006	2010	2012
CNAs	59%	66%	35%	53%	62%	58%
LPNs	22%	24%	17%	21%	33%	36%
RNs	28%	33%	17%	25%	40%	32%
Dietary	43%	54%	N/C*	44%	57%	45%
Housekeeping	40%	27%	N/C*	30%	34%	33%
*N/C = Not Collected						

## Age of Nursing Facility Workforce



- Turnover and age of our workforce will create an unprecedented demand for employees in the next 10 years.
- The youngest employee is 14 and the oldest employee is 99.
- Over one-third of our workforce is age 50 and older.
- Seventeen percent of the workforce commutes more than 30 miles to and from work.


**North Dakota  
Long Term Care**  
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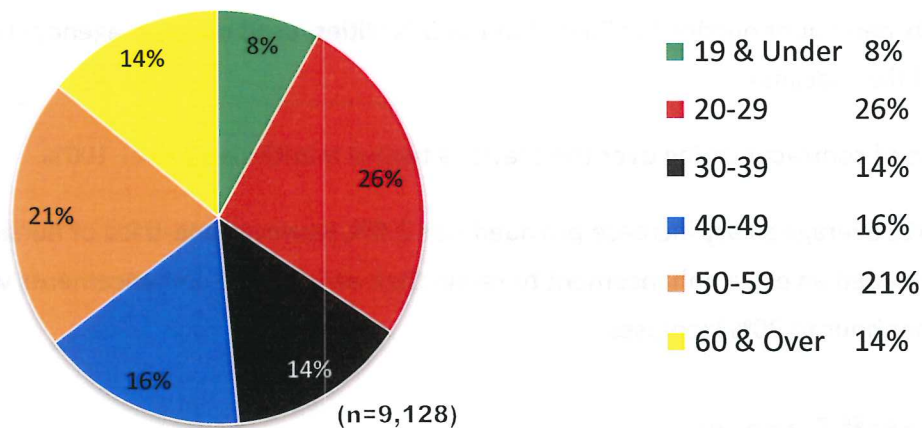
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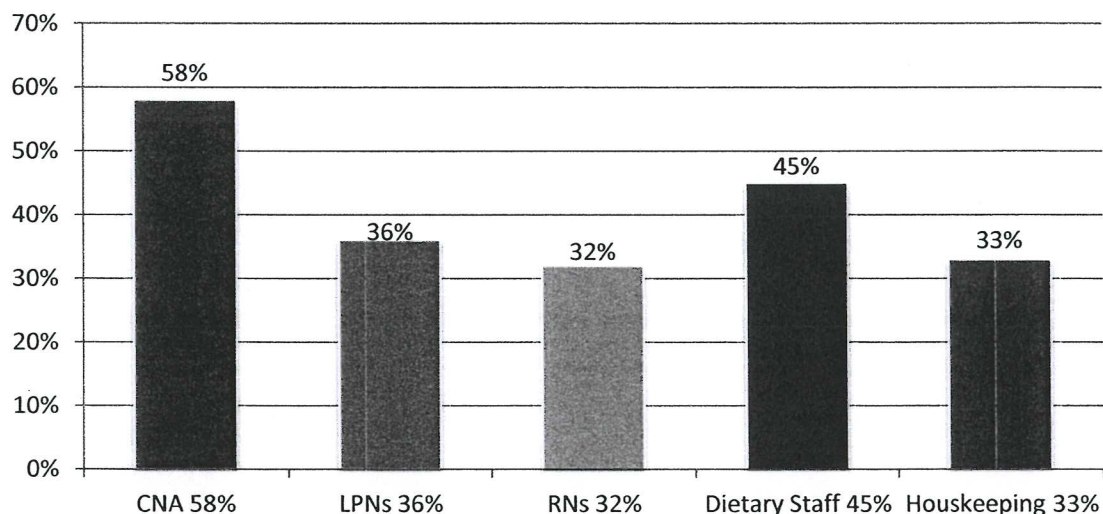

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## 2012 Staff Turnover



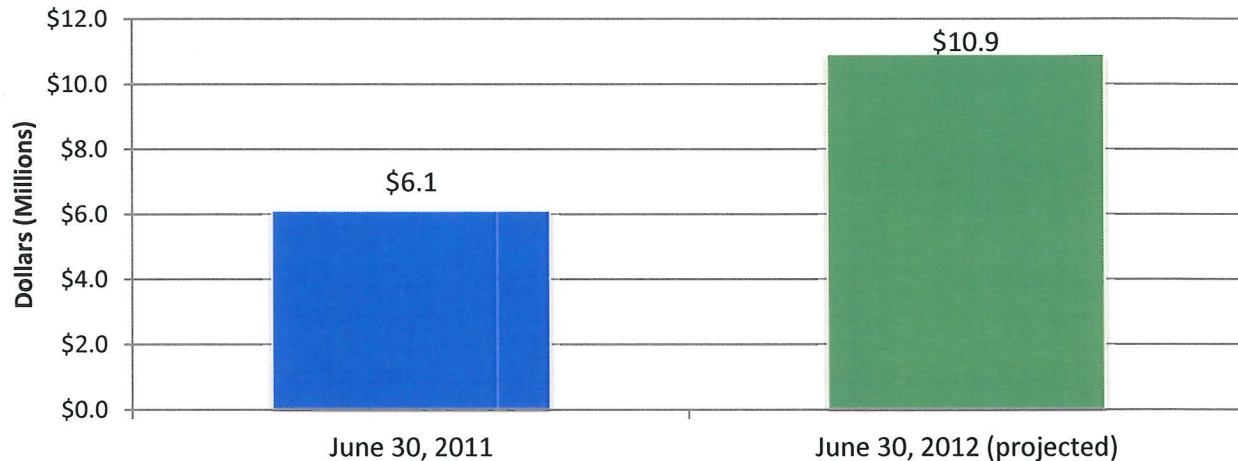


# Contract Nursing in Nursing Facilities

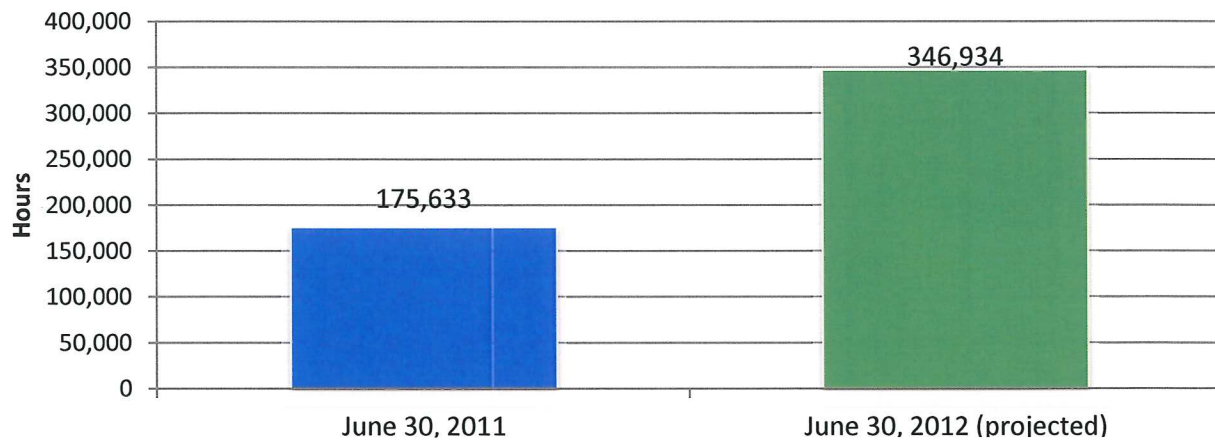
## Contract Nursing in Nursing Facilities

When facilities face staffing shortages, one option is to use contract staff to provide daily resident care. Contract nurses hours have increased 98% in one year.

**Use of Contract Nursing - Dollars**



**Use of Contract Nursing - Hours**



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